RECEIVED
CENTRAL FAX CENTER

SEP 08 2005

FENWICK & WEST LLP

Silicon Valley Center • 801 California Street • Mountain View, CA 94041
Tel 650.988.8500 • Fax 650.938.5200 • www.fenwick.com

FACSIMILE TRANSMISSION

CONFIDENTIALDATE: September 8, 2005

CLIENT-MATTER NO.: 23215-07991

To:

NAME	FAX NO.	PHONE NO.
USPTO	571-273-8300	

FROM: Sabra-Anne R. Truesdale PHONE: (650) 335-7187

T 0 58

SENT BY: Dana Chevalier PHONE: (650) 943-5363

NUMBER OF PAGES WITH COVER PAGE: 3 ORIGINAL WILL NOT FOLLOW

MESSAGE:

Please see attached.

CAUTION - CONFIDENTIAL

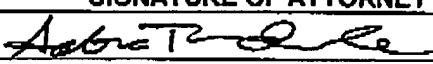
THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE OR THEIR DESIGNEE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

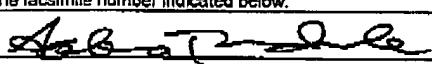
IF YOU DO NOT RECEIVE ALL OF THE PAGES, OR IF THEY ARE NOT CLEAR,
PLEASE CALL DANA CHEVALIER AT (650) 943-5363 AS SOON AS POSSIBLE.

A1000/00103/DOCS/1403268.1

TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>		Application Number	10/671,269
		Filing Date	September 24, 2003
		First Named Inventor	Scott A. Van Gundy
		Group Art Unit Number	2645
		Examiner Name	Ovidio Escalante
Total Number of Pages in This Submission	2	Attorney Docket Number	23215-07991

ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input type="checkbox"/> Amendment/Response: [] Page(s) <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT		
Signature:		
Attorney/Reg. No.:	Sabra-Anne R. Truesdale, Reg. No. 55,687	Dated: 9-8-05

CERTIFICATE OF FACSIMILE TRANSMISSION		
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.		
Signature:		
Typed or Printed Name:	Sabra-Anne R. Truesdale	Dated: 9-8-05
Facsimile Number:	571-273-8300	

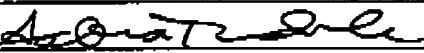
PATENT
RECEIVED
CENTRAL FAX CENTERIN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

SEP 08 2005

APPLICANT(S): Scott A. Van Gundy
APPLICATION NO.: 10/671,269
FILING DATE: September 24, 2003
TITLE: Server With Backup Capability for Distributed IP Telephony Systems
EXAMINER: Ovidio Escalante
GROUP ART UNIT: 2645
ATTY. DKT. NO.: 23215-07991

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.

Signature:			
Typed or Printed Name:	Sabra-Anne R. Truesdale, Reg. No. 55,687	Dated:	9-8-05
Facsimile Number:	571-273-8300		

COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

STATUS REQUEST

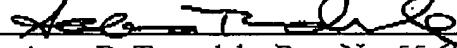
SIR:

Our file for the subject application reveals that there has been no action on this application since the filing of the application on September 24, 2003.

Please inform the undersigned, at the address stated below, of the status of this application.

Respectfully submitted,
SCOTT A. VAN GUNDY

Dated: 9-8-05

By: 
Sabra-Anne R. Truesdale, Reg. No. 55,687
Fenwick & West LLP
Silicon Valley Center
801 California Street
Mountain View, CA 94041
Tel.: (650) 335-7187
Fax.: (650) 938-5200

23215/07991/DOCS/1556939.1